

Sitters and More of Middle Tennessee
127 Franklin Road, Suite 300
Brentwood, TN 37027

****Sitters and More of Middle Tennessee is an equal opportunity employer.****

APPLICATION FOR EMPLOYMENT - Page 1

Applicant Information

Date: / /

Name: _____ Email: _____
Last First Middle

Mailing Address: _____ How long at this address: _____
(If using P.O. Box list street address below)

City: _____ State: _____ Zip Code: _____

Street Address: (if using P. O. Box as mailing address) _____
Street Address, Apt. #, etc. City, State ZipCode

Home Phone #: _____ Cell #: _____ Other #: _____

Emergency Contact: _____ Phone #: _____ Relationship _____

Position applied for: _____ Earnings expected: _____

What hours/shifts/days are you available to work? _____

Have you ever been convicted of a crime? Yes _____ No _____

If yes, indicate offense, date, and explain: _____

Note: Conviction does not necessarily mean disqualification.

Are you 18 or older? Yes _____ No _____

Driver's License Number: _____ Expiration Date: _____

Do you smoke? _____

I understand that Sitters and More of Middle Tennessee is a smoke-free work place. _____
Please initial

EDUCATION

	HIGH SCHOOL	COLLEGE	VOCATIONAL	GRADUATE/ PROFESSIONAL
SCHOOL NAME AND LOCATION				
YEARS COMPLETED				
DIPLOMA/DEGREE				

Are you a C.N.A.? _____ Current C.P.R.? _____ Current First Aid? _____
(need copy of cards)

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REFERENCES (NO FAMILY MEMBERS)

NAME	AREA CODE & PHONE NUMBER	CITY, state	# years known (At least 5 years)
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1.

2.

3.

EMPLOYMENT EXPERIENCE (AT LEAST 5 YEARS, PLEASE EXPLAIN GAPS IN EMPLOYMENT)

May we contact your current employer? Yes _____ No _____

Start with your most recent employment, including any job-related military service assignments. If you need more room, use the back of this sheet.

1. Employer	Dates employed: From: _____ To: _____	Duties
Address:	City:	State:
Telephone #() -	Hourly Rate/Salary Starting Final	Supervisor:
Reason for Leaving:	Eligible for Rehire:	

2. Employer	Dates employed: From: _____ To: _____	Duties
Address:	City:	State:
Telephone #() -	Hourly Rate/Salary Starting Final	Supervisor:
Reason for Leaving:	Eligible for Rehire:	

3. Employer	Dates employed: From: _____ To: _____	Duties
Address:	City:	State:
Telephone #() -	Hourly Rate/Salary Starting Final	Supervisor:
Reason for Leaving:	Eligible for Rehire:	

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I hereby apply for employment and affirm that all information provided by me in my application is true and complete. I understand that any misrepresentation may result in rejection of my application or termination of my employment. I understand that the State of Tennessee is an at-will employment state.

I understand and agree that if hired, my employment is for no specific time period and can be terminated by me or my employer at any time, for any or no reason. I understand that my employer has the right to modify its policies, practices and benefits without giving me notice of the changes. I understand that this position is classified as temporary/part-time and the hours are dependent on the availability and location of clients.

I authorize my employer to investigate all statements in this application and to obtain any information from my former and present employers and references (employment, criminal records, academic institutions, including a full transcript of my record of academic institutions or employment). I hereby release all of those employers, references and the Company from any and all liability arising from their giving or receiving such information. If hired, I also authorize my employer to supply information about my employment record in confidence to any prospective employer, and I hereby release my employer from any liability for providing such information. I understand that any offer of employment is contingent upon satisfactory reports concerning my academic credentials, employment references and criminal record.

I understand that Sitters and More, Inc. is a drug-free work environment.

X _____
Signature Date

I agree to pay the Agency \$ 1,500.00 as liquidated damages if, within twelve (12) months of leaving my employment with SITTERS AND MORE, INC. for any reason, I accept any employment in any capacity with any SITTERS AND MORE, INC. client for whom I have performed services at any time during my employment with SITTERS AND MORE, INC. I understand that this fee will be used for recruiting and training replacement personnel.

X _____
Signature Date

I, the undersigned applicant, certify and affirm that, to the best of my knowledge and belief; (MARK WHICH ONE APPLICABLE). I have or have not , had a case of abuse, neglect, mistreatment or exploitation substantiated against me. As a condition of submitting this application and in order to verify this affirmation, I further release and authorize SITTERS AND MORE, INC. and the Tennessee Division of Mental Retardation Services to have full and complete access to any and all current or prior personnel or investigative records, from any party, person, business or agency, as pertains to any allegations against me of abuse, neglect or mistreatment and to consider this information as may be deemed appropriate.

X _____
Signature Date

FOR HUMAN RESOURCES DEPARTMENT USE ONLY

REASON FOR NO-HIRE: _____

POSITION HIRED FOR _____ DATE HIRED _____
STARTING SALARY/HOURLY WAGE _____

COMMENTS FROM REFERENCES: